PART B -FEE(S) TRANSMITTAL

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Mail Stop ISSUE FEE **Commissioner for Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450

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	ted below or directed oth						ating a separate "FEE ADDRESS"	
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							(Signature)	
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APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR			ATTORNEY DOCKET N	O. CONFIRMATION NO.	
10/806,087	03/22/2004	03/22/2004 Raj		Rajendran	n 0315-000505/US/REA 1688			
TITLE OF INVENTIO	N: Capacity Modula	ition For Plural Co	ompressors	•				
APPLN. TYPE	SMALL ENTITY	ISSUE FE	EΕ	PUBLICATION I	FEE	TOTAL FEE(S) DUE	DATE DUE	
Non-Provisional	Non-Provisional no		\$1510			\$1510.00	09/14/2010	
EXAM W. H. R	ART UNI 3741	ART UNIT		SUBCLASS 410.500				
Address" (37 CFR 1.36 Change of con Correspondence "Fee Address" in form PTO/SB/4 Use of a Custor 3. ASSIGNEE NAME A PLEASE NOTE: Unle for recordation as set (A) NAME OF ASSIGNEE TEMPERSON Climate Temperson C	respondence address (or Address form PTO/SB/1 ndication (or "Fee Addres7; Rev 03-02 or more recenter Number is required AND RESIDENCE DATess an assignee is identificated forth in 37 CFR 3.11. Con NEE	r Change of 22) attached. as Indication ent) attached. A TO BE PRINTE ed below, no assig mpletion of this fo	1) the na ttorneys or 2) the name registered p to 2 regi- ame is liste ED ON TH gnee data w orm is NOT	vill appear on the pate Γ a substitute for filin ε) RESIDENCE: (CΠ Sidney, Ohio	egistere ely, ving as a nd the s or age inted. Type) ent. If an ass	d patent 1 Harness, a member 2 names of ents. If no 3	w, the document has been filed ate group entity Government	
4a. The following fee(s) are enclosed:				4b. Payment of Fee(s):				
X Issue Fee			A check in the amount of the fee(s) is enclosed.					
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Authorized Signature /MichaelMa						Date S	eptember 14, 2010	
Typed or printed na	me	Michael Malinzak				Registration No.	43,770	

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